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PTO/SB/92 (09-04)
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Attorney Docket No.: 10892-00018

Application No. (if known): 09/921,947

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Request for Continued Examination Transmittal (1 page)

Amendment Transmittal (1 page)

Amendment (16 pages) Fee Transmittal (1 page)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL					Complete if Known					
					Application Number 0		09/921,947-C	09/921,947-Conf. #8375		
					Filing Date August 3, 2		August 3, 200	01		
For FY 2005					First Named In	ventor	Michel A. Crepeau			
FOF F 1 2005					Examiner Name S. Wang		S. Wang			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1617						
TOTAL AMOUNT OF PAYMENT (\$) 3,190					Attorney Docket No. 10892-00018-US					
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order Other (please identify):										
X Deposit Account Deposit Account Number: 03-2775 Deposit Account Name: Connolly Bove Lodge & Hutz LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES										
		FILIN	IG FEES Small Entity	SE	ARCH FEES Small Entity		INATION FEES Small Entity			
Application Ty	<u>/pe</u>	Fee (\$)	Fee (\$)	Fee (\$		Fee (\$		Fees F	Paid (\$)	
Utility		300	150	500	250	200	100			
Design		200	100	100	50	130	65			
Plant		200	100	300	150	160	80			
Reissue		300	150	500	250	600	300			
Provisional 200 100		100	0	0	0	0				
2. EXCESS CLAIM FEES Small Entity										
Fee Description									Fee (\$)	
Each claim over 20 (including Reissues)								50	25	
Each independent claim over 3 (including Reissues)								200	100	
Multiple dependent claims 360 180									180	
							lultiple Dependent Claims			
<u>56</u> - 20 = <u>36</u> x <u>50</u> = <u>1,800</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>										
tudes Claims - Every Claims - Eco (8) - Eco Boid (8)										
Indep. Claims										
63=3×200_ =600 3. APPLICATION SIZE FEE										
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 (round up to a whole number) x =										
4. OTHER FEE(S)  Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 1201 3 extra independent claims 600.00 1202 36 extra claims 1,800.00										
	1801 Request for continued examination (RCE) (see 37 790.00									
SUBMITTED BY	911		rele		Registration No.	22.70	7 Talanhana	(302) 65	8_01/11	
Signature	HIVE.			<u> </u>	(Attorney/Agent)	32,707		<u> </u>		
Name (Print/Type)	William E. I	McShane					Date	January 2	20, 2006	
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William Commissioner for Parties to the Parties to Alexandria, VA 22313-1450.

Dated: \_\_\_\_January 20, 2006 Signature: William E. McShane